

08/644289

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

08/26/96 08644289  
1 101 828.00 CK RFP135DUS

*exto refund  
414.00  
for*

~~330 DS 05/24/96 08644289~~  
~~1 101 828.00 CK RFP135DUS~~

PTO-1556  
(5/87)

RP18230 08/26/96 08644289

04-1790 180 201

414.00CR

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>8-196</u>		2 Serial/Patent # <u>08/644289</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/>	Filing		\$ <u>414</u>							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input type="checkbox"/>	Petition		\$							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND								
		\$ <u>414</u>								
10 REASON:		8 TO BE REFUNDED BY:								
<input checked="" type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Treasury Check							
<input type="checkbox"/>	Duplicate Payment	<input type="checkbox"/>	Credit Deposit A/C #:							
<input type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>0</td><td>4</td><td>--</td><td>1</td><td>7</td><td>9</td><td>0</td> </tr> </table>		0	4	--	1	7	9	0
0	4	--	1	7	9	0				
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>D. ESTEY</u>		TITLE: <u>EXAMINER</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308-0591</u>								
OFFICE: <u>IPED</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>[Signature]</u>		DATE: <u>Aug. 26, 1996</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B